



IFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: James A. Haberstroh

Art Unit: 3721

Serial No.: 10/600,198

Examiner: G. Weeks

Filed: June 20, 2003

For: STRAPPING MACHINE WITH  
STRAP FEEDING AND  
TENSIONING SYSTEM WITH  
AUTOMATIC REFEED

I hereby certify that this paper is being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313, on this date:

08/05/2004

Date

Corri Feuerstein

Attorney

Docket No: 14183 (6365-89766)

**AMENDMENT A**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

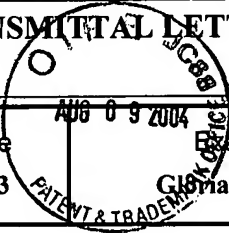
Sir:

In response to the Office action of May 5, 2004, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>14183 (6365/89766)</b>	
Applicant(s):						
Application No. <b>10/600,198</b>	Filing Date <b>06/20/2003</b>	Examiner <b>Gloria R. Weeks</b>	Customer No. <b>44986</b>	Group Art Unit <b>3721</b>	Confirmation No. <b>7564</b>	



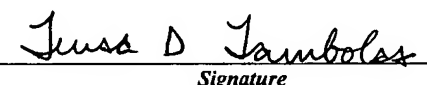
Invention: **STRAPPING MACHINE WITH STRAP FEEDING AND TENSIONING SYSTEM WITH AUTOMATIC REFEED**

COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.  
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	17 -	20 =	0	x \$18.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0	x \$86.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	


☒ No additional fee is required for amendment.  
☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_  
☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.  
☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **23-0920**  
☒ Any additional filing fees required under 37 C.F.R. 1.16.  
☐ Any patent application processing fees under 37 CFR 1.17.

  
 \_\_\_\_\_  
 Signature

Dated: **08/05/2004**

**Teresa D. Tambolas, Esq.**  
**Reg. No. 47,126**

I certify that this document and fee is being deposited on  
**08/05/2004** with the U.S. Postal Service as first  
 class mail under 37 C.F.R. 1.8 and is addressed to the  
 Commissioner for Patents, P.O. Box 1450, Alexandria, VA  
 22313-1450.

  
 \_\_\_\_\_  
 Signature of Person Mailing Correspondence

**Corri Feuerstein**  
 \_\_\_\_\_  
 Typed or Printed Name of Person Mailing Correspondence

CC: